

EPAUnited States Environmental Protection Agency
Washington, DC 20460**Work Assignment**

Work Assignment Number

4-42

☐ Other ☒ Amendment Number:

000002

Contract Number
EP-C-08-010

Contract Period 12/16/2008 To 05/30/2014

Title of Work Assignment/SF Site Name

Base Option Period Number 4

Healthy Communities Research

Contractor

SCIENTIFIC CONSULTING GROUP, INC, THE

Specify Section and paragraph of Contract SOW

2.2

Purpose:

☐

Work Assignment

☐

Work Assignment Close-Out

☒

Work Assignment Amendment

☐

Incremental Funding

☐

Work Plan Approval

Period of Performance

From 12/01/2012 To 05/30/2014

Comments:

Sustainable and Healthy Communities Research Program Community Engagement Activities

☐

Superfund

Accounting and Appropriations Data

☒

Non-Superfund

SFO
(Max 2)☐

Note: To report additional accounting and appropriations data use EPA Form 1900-69A.

Line	DCN (Max 6)	Budget/FY (Max 4)	Appropriation Code (Max 6)	Budget Org/Code (Max 7)	Program Element (Max 9)	Object Class (Max 4)	Amount (Dollars)	(Cents)	Site/Project (Max 8)	Cost Org/Code (Max 7)
1										
2										
3										
4										
5										

Authorized Work Assignment Ceiling

Contract Period:

12/16/2008 To 05/30/2014

Cost/Fee:

LOE:

This Action:

Total:

Work Plan / Cost Estimate Approvals

Contractor WP Dated:

Cost/Fee:

LOE:

Cumulative Approved:

Cost/Fee:

LOE:

Work Assignment Manager Name Susan Peterson

Branch/Mail Code:

Phone Number 202-564-1077

FAX Number:

(Signature)

(Date)

Project Officer Name Melissa Revely-Wilson

Branch/Mail Code:

Phone Number: 703-347-8523

FAX Number: 703-347-8696

(Signature)

(Date)

Other Agency Official Name

Branch/Mail Code:

Phone Number:

FAX Number:

(Signature)

(Date)

Contracting Official Name Camille W. Davis

Branch/Mail Code:

Phone Number: 513-487-2095

FAX Number: 513-487-2115

(Signature)

(Date)

PERFORMANCE WORK STATEMENT

Contract Number: EP-C-08-010

Work Assignment Number 04-42 Amend 1

Title: Sustainable and Healthy Communities Research Program Community Engagement Activities

SOW Section & Paragraph: 2.2

PERIOD OF PERFORMANCE: Option Year 4: From date of award to 5/30/14

The purpose of this amendment is to add the language in red below:

Task 2: Programmatic Information and Assessment

The Contractor shall provide support for compiling and assessing the issues, science (tools), partnerships for the Listening Session communities. The contractor will complete a report and other products on the information. The contractor will not be collecting or generating any environmental data. Building on the information gathered from the Listening Sessions, EPA will provide information from the community-based programs, including, websites, reports, or other sources. The contractor shall identify the existing science that is being used in communities (e.g., data sets, tools, information and methodologies, and the processes and partnerships) that help facilitate the use of the science in addressing environmental issues towards achieving sustainable communities. The Contractor shall review existing materials, conduct research, and provide graphics support to design documents. The Contractor shall publish the report in final format ready for printing. The Contractor shall work primarily with EPA staff for product development of compilation and assessment. The Contractor shall provide hard copies and electronic files of materials developed including Word format and published format for the web and printing.

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Washington, DC 20460**Work Assignment**

Work Assignment Number

4-42

☐ Other ☒ Amendment Number:

000001

Contract Number

EP-C-08-010

Contract Period 12/16/2008 To 11/30/2013

Base

Option Period Number 4

Title of Work Assignment/SF Site Name

Health Communities

Contractor

SCIENTIFIC CONSULTING GROUP, INC, THE

Specify Section and paragraph of Contract SOW

2.3, 2.4

Purpose:

☐

Work Assignment

☐

Work Assignment Close-Out

☒

Work Assignment Amendment

☐

Incremental Funding

☐

Work Plan Approval

Period of Performance

From 12/01/2012 To 11/30/2013

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5										

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Contract Period:

Cost/Fee:

LOE:

12/16/2008 To 11/30/2013

This Action:

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Work Plan / Cost Estimate Approvals

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Cost/Fee:

LOE:

Cumulative Approved:

Cost/Fee:

LOE:

Work Assignment Manager Name Susan Peterson

(Signature)

(Date)

Branch/Mail Code:

Phone Number 202-564-1077

FAX Number:

Project Officer Name Melissa Revely-Wilson

(Signature)

(Date)

Branch/Mail Code:

Phone Number: 703-347-8523

FAX Number: 703-347-8696

Other Agency Official Name

(Signature)

(Date)

Branch/Mail Code:

Phone Number:

FAX Number:

Contracting Official Name William Yates

(Signature)

(Date)

Branch/Mail Code:

Phone Number: 513-487-2055

FAX Number: